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BITES OF RATTLE AND OTHER POISONOUS SNAKES TREATED IN VENEZUELA.

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[Communicated for the Boston Medical and Surgical Journal.—Continued from page 119.]

It is well known that this part of South America abounds with various poisonous reptiles, such as the rattle-snake, and the other species called coral, tiger, mapanare, &c. &c. There is, perhaps, not a spot of this country where some of these horrid animals are not to be found, exposing the life of the traveller as well as that of the laborer. Even in private dwellings in the cities, those who possess gardens standing near springs or rivers, are often visited by this South American scourge.

Thirteen years' residence in this region of the world, has brought to my knowledge a great many cases of bites of these reptiles, and some of them came under my immediate attendance. I have also studied the effects of many remedies employed by the natives, and have had more than one opportunity to ascertain their very slight efficacy in cases of such bites over an arterial branch or trunk of any size, where the poisonous fluid of the snake was quickly absorbed, causing a dissolution of the blood and death. When the bites are distant from large blood-vessels, a ligature above, the application of the actual cautery, some wet tobacco leaf or pounded guaco over the wound, and internally some lime juice, pure, or mixed with sweet oil, some guaco juice, brandy or spirit of any class, have often prevented any further bad results, and even without affecting the system in any way.

It is a general belief amongst the natives, that the use of the concentrated juice of the dark violet-colored guaco on certain regions of the body and limbs, scarifying the parts, and applying on them the said juice for absorption, at the same time that large doses are given for a number of days inwardly, are sure means of securing life against the bites of snakes. This foolish operation is generally practised by Indians, Creoles, or Negroes, but often men of education and science submit to it, believing in its real value. I have known many of such inoculators and inoculated, who have lost their lives by boldly catching and playing with snakes of the worst kinds, believing they would never be bitten. In fact, those inoculated in the said manner will never fear nor run from a snake; they boldly attack and catch it with their hands, and secure it.

Their moral activity is raised by the belief of invulnerability, and the snake, frightened by the bold attack and grasp of the man, is easily secured and disconcerted in such a way as to make no defence. This, in my opinion, is the real value of the inoculation of the guaco juice. But, as I said before, I have known many of the inoculated who have fallen victims to their faith, some hours or days after they had caught a snake, when attempting again to lay their hands on it. Amongst these victims I can mention a well-known and rich planter of Caracas, Mr. Ugarte, who, playing confidently, in presence of some visiting friends, with a rattle-snake he had had in his possession for some time, and which he twisted round his neck after having drank a large tumblerful of the concentrated juice of the dark-violet guaco, which he always did on such occasions, was bitten at that moment on the upper lip and died two hours after, in spite of an enormous use of guaco. A slave of Mr. Doningo Tovar, of Caracas, also had full confidence in his inoculation, and whilst playing with one of the species of snakes called "tiger," against the will of his master who had warned him of the danger, was bitten and died in about two hours, although a large quantity of guaco was applied to him in the usual way. I could record many similar instances had I sufficient space in your valued Journal, but the two mentioned, known and recollected by every inhabitant of Caracas, will be sufficient to cause one to doubt the effect of the guaco on the human system, as a certain antidote against bites of poisonous snakes. The guaco is the "*Mikania guaco*" of Humboldt and Bonpland, of which there are two species (the "dark-violet colored"; and the pale-green colored, called the "white guaco"), and its action on the system is sudorific and tonic; but less tonic, I am certain, than the Peruvian bark, or its extractions.

We have many other plants here, and amongst them, and standing next to the guaco, the "*raiz de lagartija*" (the lizard root), generally considered as efficacious in bites of snakes. From my experience, however, I consider them as mere auxiliaries, and would never depend upon them in a serious case, no more than I would on the guaco.

Another sort of treatment is employed against the bites of snakes, by a species of quacks or jugglers in the interior of the country and amongst the natives. It consists in an oration or prayer directed to St. Paul, in whose curative effect the bitten person must have the greatest faith and confidence. Hence, as soon as an individual is bitten, the juggler is sent for; he comes, with his vegetable remedies, applying them internally and externally; the printed oration is placed on the patient's breast; the picture of the saint is placed on the table, with one or more lighted candles in front of the patient. every one of the assistants kneeling down; the said oration or prayer is then read by the juggler, the assistants repeating the verses, till the patient dies or gets well. If he gets well, the saint is supposed to have listened to his petition; but if not, and all having been done, he is considered to have committed some great sins and the saint would not assist him!

Now I have said already, that in cases where the bite was distant from a large vessel, or when only a very slight quantity of the poisonous

fluid had been introduced and absorbed, of course the cure could be easily obtained, even with some brandy and water. It is to be considered, also, that the strong faith of the natives in the effect of the oration referred to, might produce a powerful re-action on the nervous centres of the patient, at the arrival of the juggler; and this alone, I think, would be sufficient to help nature to expel the poisonous virus in many instances, as it is a physiological rule that our system alone will always attempt to perform that act against noxious agents, which is successfully obtained when the comparative powers are in relative equilibrium or strength. Thus, although practised blindly, the successful application of Saint Paul's oration for the cure of bites of poisonous snakes might be explained on philosophical principles—the exciting of the moral power, and its stimulating and tonic action on the whole system.

The general symptoms manifested after a serious bite of a poisonous snake in this country, are the following:—General uneasiness and apprehension; the idea of sure death, difficult to eradicate from the patient's mind; the face very pallid; stuporous appearance of the sight; eyes sunk in the orbits, and a dark-brown areola around them; the whole body covered with a viscous perspiration; nausea and vomiting; the conjunctivæ sometimes injected, and the pupils dilated; the pulse either filiform, quick and weak, or much under the natural pulsations, large and disappearing on pressure; dyspnoea from the beginning, and increasing gradually; faintness and sighing; the tongue of a dark-red color, sometimes livid, slimy, discolored, or black when the exudation of dissolved blood begins from the surfaces of the mucous membrane; the breath and exhalation of the body, of the smell of approaching decomposition; surdity and cecity, although consciousness still remains; lastly, coldness of the extremities and death! These symptoms, as I have said, are the general ones; many of them existing at the same time, and others following them gradually. By close attention, I found them very similar to those arising from adynamic or putrid fevers. In most cases where the poison has acted strongly, the blood becomes carbonized, and exudates, shortly after the bite, from all the openings of the mucous membrane, showing thus its dissolution. Often when the pulse maintains itself at 80 to 100, and the other symptoms are not extreme, the exudation or passive hemorrhage will continue for days, the patient recovering finally. Proceeding with my own views of the nature of the action of the poisonous fluid of snakes, on the human system—I think it acts more particularly on the albuminous portion of the blood, dissolving it almost instantly when the bite is over a large bloodvessel, where absorption may be quicker and greater.

I have heard of many antidotes for bites of snakes, and lately heard of a new one, viz., iodine. I cannot say that there are none good; but my object is simply to publish my convictions and experiments respecting those used in this country, and make them known, with a desire of being useful. The result of the treatment I have most confidence in, is based on this rule: prevent, if in time; arrest or check the dissolution of the blood, if already commenced, and which is the result of absorption of the poisonous fluid, particularly dissolving its albuminous por-

tion. Thus any remedy that can with any certainty produce the effect of quickly opposing the dissolution of the blood, will, I believe, cure the patient. Mercury, when judiciously applied, has the effect of increasing and thickening the albuminous portion of the blood very quickly, producing a favorable re-action against the morbid state, particularly in cases of snake bites, when associated with some powerful tonic. It is the remedy I have found the most active and efficacious in all such cases I have treated in this country. The manner in which I use it has been described in a former communication to this Journal (page 120). In some cases opium has been added to the powders or pills; but I think it is better to spare its use, and to avoid narcotization, as it is important to keep the patient excited and awake to facilitate re-action. Common drink—cold water, or any aromatic infusion, not in contradiction with the medicines. Nourishment, if indicated or possible—oatmeal gruel, arrowroot, or bread and tea, &c.

I remember attending, some years ago, in Caracas, the cousin and overseer of Dr. Carlos Arvelo, an eminent and well-known physician, and at the doctor's own house, for the bite of a large and very poisonous snake called "mapanare." The bite was over the pedal artery; the case was a very severe one, with complete dissolution of the blood. Some bites of leeches which had been applied to him a month previous to the accident, for an affection of the stomach, opened suddenly, bleeding profusely; and I was obliged to cauterize every one of them with lunar caustic, introducing a small ball of lint in each hole with a probe, and placing some adhesive plaster over them. The patient recovered at last, under the very active and combined treatment above alluded to. The dose of calomel given every hour during three days, with very few exceptions, was eight grains, with ten of quinine, and some musk and camphor. Almost every grave symptom, indicated as general in such cases, presented itself; but I firmly persisted against advice in the stated treatment, and the patient was saved. Two years ago the patient passed through this city, with Dr. Arvelo's eldest son, now a physician also of Caracas, and called on me, saying he could not do less than renew his thanks for my past assistance. I examined the spot where he had been bitten by the snake. It still retained a livid appearance or darkened color of two inches square, although perfectly healed, the individual stating he felt now and then a dull pain in the foot.

I could refer to many other cases treated successfully on the same principles and with the same remedies; but it would occupy too much space to do so.

Puerto Cabello, March 16th, 1851.

ON THE PRACTICAL USES OF COD-LIVER OIL.

[Communicated for the Boston Medical and Surgical Journal.]

THERE is reason to believe that the uses of medicines are too much governed by the influence of *popular excitement*; and instead of thoroughly testing their intrinsic merits, as therapeutic agents, and retaining

them, if valuable, for permanent resources, we too frequently throw them aside for others that the tide of innovation has brought forward. Excepting a few well-known remedies, such as mercury, opium and antimony, which have been retained more on account of conservative prejudice than discriminating experience, this is a fact that cannot be denied; and to this, is owing the history of thousands of medicinal agents, which one day had their votaries, and now only serve to swell our *materia medica* into a ponderous and unwieldy tome. This has been the fate of medicines whose virtues were once demonstrated to be worthy the praise they then obtained. Instance the far-famed naphtha, which, but a few years since, was considered by the first practitioners almost a specific for *phthisis pulmonalis*, but is now nearly abandoned.

Shall this be the fate of *cod-liver oil*, now so extensively used as a remedy for scrofula and incipient pulmonary consumption? We have every reason to fear that it will be, because its great use was prematurely occasioned by popular excitement.

In no part of my professional experience, have I been more amused by the caprice of custom, than in introducing this article. Some three years since, being anxious to test its virtues in several cases, where all other reliable medicines had failed to benefit, I recommended a trial of it. At that time it was but little known; or, at any rate, it had not got into popular use: and although the flattering hope of patients under the peculiar exciting malady of consumption, is generally sufficient to induce a resort to anything new, the very name of *fish oil* was sufficient to excite a disgust against it, that I could not overcome in any other way than by reading to them several detailed reports of its wonderful cures, in Braithwaite's Retrospect, and other journals of the day.

But I commenced this article with the intention of giving the history of a few well-marked cases, showing the certain and happy results of the oil in my own practice.

Abijah Gleason, aged 50, of West Millbury; occupation for several years has been that of grinding black lead. Temperament, equally of the nervous, sanguine and bilious, which has enabled him to sustain an unusual fortitude of mind. I was called to see him July 26, 1848. Much difficulty of respiration. He had been able to lie down but very little for three nights, owing to increased difficulty of respiration in the recumbent posture—a sharp catching pain in the anterior and lateral portion of right chest. Suddenly taken the night previous, raising, very rapidly, a large quantity of pure pus from the lungs, attended constantly with much soreness of the chest. Pulse 90, small. Appetite small and disturbed. Some cavernous cough, but not harassing; hectic, attended with colliquative night sweats, and alternate chills and febrile excitement. Percussion emits some dulness over inferior and lateral portion of right lung—dulness continuing from the lower third, so connected with the diaphragm and the situation of the upper portion of the right lobe of the liver, that it was difficult to tell how much of the dulness was occasioned by an enlargement or morbid position of the latter; as tenderness as well as enlargement, together with morbid secretion, was discovered in the liver. Auscultation discovered evident pecto-

riloquy; humid rhonchus and amphoric respiration at the summit of the right lung. A large cavity existed in this region—mucous or crepitant rales evidently indicating pulmonary fistula. Left lung resonant and healthy.

Patient says that he has had an abscess break as often as once a month for three years, and discharge to the amount of half a pint, or more, in a short time, and to continue a moderate expectoration from two or three days to a week in succession. If less frequently than once a month, the greater the shock and prostration produced upon the health and strength, and the more profuse the quantity discharged; and the more frequent these eruptions (and it is nothing unusual for them to return in much less than a month), the smaller the quantity expectorated, and the system more readily rallies from the effects. Much soreness, and a sense of distress or oppression, are always felt for two or three days before these discharges take place, so that he can always calculate on their appearance with considerable certainty. At times the prostration produced has been sufficient to confine him to the house for a week or two—at other times, especially if the weather is favorable, he may be able to take gentle exercise at once out of doors. Between these periods he is frequently able to walk a mile or more, without any great fatigue, and can ride several miles in an easy carriage without being uncomfortably affected. He had tried almost every system of treatment, from botanic or Thomsonian, down through every variety of nostrum that has been recommended or used for similar complaints, but without any permanent benefit, and *probably with much injury*.

At this time I considered the case incurable. The ulceration had been of so long standing, and the caverns in the lung were so large, it seemed but quackery to promise more than palliative relief. There being much tightness or stricture of the bronchi, and oppression, for the want of free expectoration to unload the lungs of the purulent accumulation; to fulfil this indication, and to stimulate the diseased surfaces to a healthy granulation, I administered, combined in suitable proportions, syrup lobelia, naphtha and morphia. To correct a fetid breath and loaded tongue, which I supposed proceeded from deranged secretions of the liver, in a measure, I gave occasionally a mild alterative—and likewise advised the liberal use of London porter. This treatment had a very beneficial effect for the time; he gradually recovered from the soreness and oppressed state of respiration, his strength rallied, so that he got out to his usual exercises, and attended to his business. But still, during the winter following, these paroxysms continued to occur with more and more severity, so that he became much reduced, and was confined for most part of the time to the house and to his room. At this time his life was despaired of both by himself and friends, and he made every arrangement in his business to meet soon the fatal issue. All treatment, thus far, seemed to be but of temporary benefit, while the ulceration appeared rapidly to be gaining ground. More with the idea of keeping up the hope of my patient, than the expectation of any sanative result, I advised a thorough trial of *cod-liver oil*. He commenced about the first of May, 1849, in doses of a tablespoonful three

times daily, generally on an empty stomach, in porter. A month had not elapsed before a marked change had taken place both in his general health and the feeling of the lungs; the soreness gradually subsided, his cough disappeared, his respiration became easy and natural, and in a little time all expectoration of purulent matter ceased, together with the periodical eruptions. The hectic and night sweats abated, sleep became natural and refreshing; the appetite returned, with a healthy state of digestion; the muscles acquired fulness, with renewed tone and activity; and, in fact, the whole system, under the continued use of the oil, seemed to be regaining its wonted state of health. And now, after a period of nearly two years, there has not been an eruption or any appearance of a renewed abscess, and all purulent expectorations have long since subsided. He told me personally the last fall that he felt perfectly well; he had no trouble from his lungs, he felt in better health and stronger than he had done for years. He had worked steadily every day, and had, during the haying season, kept up with other good mowers, and done his day's work as easily as any laborer.

The beneficial results in this case must be attributed alone to the oil, as no other medicine was made use of from the time of its commencement. He has informed me, since discontinuing the oil, that he took some twelve bottles in all, holding a pint each. The question may justly arise in this case, whether the abscesses that formed so often and discharged in such large quantities, were the result of long-continued tubercular deposit or the immediate effects of pneumonia or bronchial inflammation? It is my opinion that they were the result of the latter, as he had always enjoyed good health up to the commencement of this attack, which was produced by a violent catarrh.

[To be continued.]

Worcester, April 1, 1831.

A. STONE, M.D.

[THE following essay, on a subject full of interest to the anatomist, was written and first published in 1832. It is now re-printed, by request of the author, who wishes the reader to be apprised that he considers the subject very far from being exhausted—there still remaining an ample field for anatomical research. The "Supplement" was contained in the original essay.—Ed.]

AN ESSAY ON THE GANGLIONIC SYSTEM OF NERVES IN THE
CAVITY OF THE CRANIUM, AND ITS USE.

BY WILLIAM INGALLS, M.D.

[Communicated for the Boston Medical and Surgical Journal.]

I. The energy of the brain, and the due performance of its functions, as it has been supposed, do not depend on its volume, the size of its convolutions, nor the temperaments.

II. As in other viscera, the perfect organism of the brain is undoubtedly a condition essential to the performance of its functions with exactitude and energy; for, a malconformation, or some defect in its minute

structure, not cognizable by the senses, may render this viscus unsusceptible of impressions necessary to its healthy and vigorous action. But, a complex organ, deprived of the stimulus of nervous influence, however perfect its structure, becomes torpid, and its function destroyed.

III. From the following post-mortem examinations it may be inferred, the size of the brain, the number, depth and thickness of the convolutions, are merely conditions, but, perhaps, necessary conditions in the production of thought, and the propensities to which man is subject.

CASE 1.—In this case, the person was subject to frequent and great mental excitations. The brain was of extraordinary dimensions, and all its parts were uncommonly developed: the convolutions were large, distinct and numerous; the ganglia were readily distinguished and displayed; the medullary cords easily traced; and the pineal gland was of the pine-apple form, and so large as to attract particular attention.

The remarkable development of the brain, and the dissection taking place a few hours after death, in a subject that had died suddenly from suffocation, and the whole organ being moist with serosity, enabled me to demonstrate the minute parts with comparative ease; and led me to believe, the pineal gland and other similar bodies, the uses of which have not been explained, were destined to perform an important part in the functions of the brain.

CASE 2 was the dissection of the brain of a person, who sustained the reputation of possessing fine intellectual powers, and who had practised law with reputation and success. The brain was small, the convolutions were diminutive, comparatively indistinct, and apparently more numerous than usual.

CASE 3 was the dissection of the brain of an idiot, of very diminutive stature. In this subject, the capacity of the cranium in proportion to the size of the body was exceedingly small; the cerebrine convolutions were *few* in number, but very large and uncommonly distinct. This idiot was wholly destitute of understanding, and devoid of every propensity, good or bad. The pineal gland was converted into a substance resembling a small melanose petechia.

By the way, it may not be improper to remark, there was found in the digestive canal, a number of lumbrici of extraordinary size; several had penetrated by the *pori bilarii* into the substance of the liver; and three were closely impacted into the common biliary duct, by which it was greatly enlarged, both in diameter and length.

CASE 4 was the brain of a man possessing a degree of intelligence, but was so much of an idiot, he was incapable of providing for his physical wants; and, on this account, he was placed under the superintendence of a brother. The brain was large, and all its parts fully developed. The pineal gland was of the pine-apple form, cartilaginous, and larger than usual.

In this individual, the intellect remained unimpaired till he arrived at the age of 9 years; when, after a severe fever, ensued the mental imbecility, which continued through life. Several analogous cases occurred in the same family.

IV. In this place, it was my intention to give the anatomy of the

brain; but as hitherto the relative importance and use of parts, besides those that are now under consideration, have not been satisfactorily demonstrated, this subject will be postponed, to be resumed at some future period.

From the remarkable appearance of the pineal gland, in cases 1, 3 and 4, Section III., I was induced to examine the parts connected with this organ; and the result of my investigation will be found in the following paragraphs.

V. It is not pretended, however, because the organization of the pineal gland was in a morbid condition, it was the sole cause of idiocy in cases 3 and 4, Section III.; yet it is not unreasonable to suppose, the diseased state of this organ may have had an influence in diminishing the activity of the brain.

VI. It is thought by many to be capable of demonstration, the diseased state of the ganglia of the trisplanchnic nerve may have an important agency in impairing, disturbing, and even destroying the functions of viscera essential to life.

VII. Hence, if it be established, the glands and other bodies contained in the cavity of the cranium are found to discharge the office of ganglia, the brain will undoubtedly be liable to suffer from the disordered affections of these parts.

VIII. Glandular pinealis is for the most part of a conical form, and is situated on the back part of the posterior commissure. Its base is attached by a short slender neck to a short transverse medullary cord, which, at each of its extremities, divides into two pedunculi, the anterior and posterior. The former passes over the thalamus nervi optici near its internal margin, and finally terminates in the eminentia mammillaris. In its passage, it sends a few filaments to the optic couch, and one to the anterior crus of the fornix, just before it arrives at its ultimate destination. The latter, which is much shorter than the former, takes a direction backward, and is united with the quadrigeminal bodies.

IX. The eminentiæ mammillares are two small hemispherical bodies, situated at the base of the brain, anterior to the cribriform plate, and posterior to the junction of the optic nerve. From each of these bodies proceed three nerves, or medullary cords, an anterior, middle and posterior.

X. The first, or anterior cord, penetrates the anterior lobes of the brain, and may be traced to a considerable distance into its substance.

XI. The second, or middle cord, under the several appellations of anterior and posterior crura of the fornix and corpus fimbriatum, extends from the eminentia mammillaris to the bulb of the pes hippocampi major. This cord, having, like the nerves belonging to the ganglionic system, connection with small masses of gray substances, furnishing various organs with nervous filaments, and anastomosing with other cords, is justly entitled to the rank of a nerve.

XII. The anterior crura of the fornix go upward and backward, gradually approximating each other, till they come in contact in the anterior part of the lateral ventricles; soon after their junction they begin to diverge, and continue to diverge, assuming in their course the name

of posterior crura, until they reach the pedes hippocampi majores; when, under the name of corpora fimbriata, they follow the course of these bodies, to which they adhere almost to their termination. These cords or nerves send off fibrillæ, which, in some subjects, from their peculiar distribution on the inferior face of the fornix, have been considered not inaptly to bear a strong resemblance to the strings of a lyre. These fibrillæ supply with nervous influence the part of the corpus callosum, where this and the fornix coalesce.

XIII. The third, or posterior cord, penetrates the body of the optic couch, and ascending, till it arrives nearly to the semicircularis geminum, it soon separates into a number of filaments, which run backward parallel to the above-mentioned cord, and, finally, emerging from the optic couch, unite with the filaments of the semicircularis to form a plexus.

XIV. The tænia semicircularis geminum originates from the tuber cinereum, and anastomoses with the anterior crus of the fornix; and, receiving a branch from the anterior peduncle of the pineal gland, takes a direction backward, coursing between the thalamus nervi optici and corpus striatum, till it meets the branches of the posterior cord of the eminentia mamillaris, when, dividing into filaments, it unites with those of the former body to form a plexus.

XV. The result of the union of these two nerves, Sections XIII. and XIV., if it be allowed to call them so, is the formation of a plexus; from which filaments are distributed to the optic couch, and the flooring of the inferior horn of the lateral ventricles; some also are continued to the extremity of this sinus, and anastomose with the posterior filaments of the anterior commissure, before they disappear.

XVI. The commissura anterior is a round medullary cord, which traverses the middle lobes of the cerebral hemispheres, and terminates in a radiating lash of filaments; some extending forward as far as the fissure of Sylvius, others backward to the descending horn of the lateral ventricles; the former anastomosing with the root or origin of the olfactory nerve, the latter with the filaments proceeding from the plexus formed by the branches of the semicircularis, and the posterior cord of the eminentia mamillaris (and the corpus fimbriatum.—*Meckel*).

It is slightly curvilinear, with its convex part forward: a small portion of it may be seen in the third ventricle, just before the anterior crura of the fornix.

XVII. If we take a survey of the wide range which the cords or nerves, above described, perform, the mind must be convinced of the similarity existing between these and the nerves of the ganglionic system in the other cavities. In tracing the cords from ganglion to ganglion, commencing with the pineal gland, we find that the posterior peduncle is connected with the tubercula quadrigemina, and the anterior with the eminentia mamillaris; that from the eminentia mamillaris depart three medullary cords, an anterior, middle and posterior; the two latter travel backwards, the middle terminating in the corpus fimbriatum, and the posterior anastomosing with the semicircularis to form a plexus; that the branches of the anterior commissure are united with those of the above plexus and the corpus fimbriatum posteriorly, and anteriorly with

the external root or origin of the olfactory nerve; and that this nerve is connected by its internal root or origin either immediately or through the medium of the tuber cinereum with the optic nerve. To this it may be added, the anterior commissure is connected with the tuber cinereum. Hence by the agency of the above-mentioned cords and their appendages, the ganglia, a stimulus necessary to its functions is not only supplied to the brain, but a mutual relation is preserved between the peripheral and the central parts of this viscus, and the optic nerve.

XVIII. The glandula pituitaria is an isolated mass of gray substance, lodged in the sella turcica, and furnished with a neck or twig; which by Meckel is thought to be attached to the anterior commissure. In these respects, as well as in its diseases, it has a striking analogy to the pineal gland.

XIX. The tuber cinereum, viewed from the base of the brain, is of a triangular form, and situated between the junction of the optic nerves, and the mammillary eminences. It is attached by its apex, to the decussating portion of the former; but its base lies towards the latter. This mass has all the properties of a ganglion. Its thickness is very considerable, and embraces the greater part of the anterior pillars of the fornix, and the parts of the nerves that anastomose with them; viz., the anterior pedunculi of the pineal gland, and the *tænia semicircularis geminum*; and also a portion of the anterior cord of the *eminentiæ mammillares*. The *infundibulum* enters the inferior face of this body near its centre.

From a review of the structure, arrangement and distribution of the various organs, above described; and their being particularly adapted to accomplish the purpose for which they were evidently designed, the mind is irresistibly impelled to the conclusion, the *energy* and *activity* of the *brain*, like the liver, heart, and other viscera in the abdominal and thoracic cavities, must depend on a *ganglionic system* of nerves. Should this position be eventually established, it would afford a foundation for the attainment of a clearer and more precise knowledge of the physiology of the brain.

Supplement.—My opportunities for dissection being very precarious, it is impossible for me to pursue the study of the anatomy of the brain with the regularity and constancy which so complex an organ demands. This may serve as an apology for the additional description of the *infundibulum* and its connections.

Since the manuscript was placed in the hands of the publishers, an opportunity of dissecting the brain, and of obtaining a more precise knowledge of the relative situation of the *infundibulum*, the *tuber cinereum* and the anterior commissure, has presented itself.

The brain was placed on its vertical surface, and the optic nerves were cautiously detached from its connections from before backward, till the membrane, which closes the anterior extremity of the *iter ad infundibulum*, came into view. The removal of this membrane opened a free communication between the third ventricle and the surface of the brain; and, through the aperture made by the removal of the membrane, the orifice of the *infundibulum* was conspicuous. On folding back with pre-

caution the optic nerves, and introducing the point of the blow-pipe into the orifice of the infundibulum, its canal was inflated through its whole extent.

The border of the aperture, which was circular, and which had been closed by the above-mentioned membrane, consisted of gray substance, one portion of which was attached to the commissure above, and another was blended with the tuber cinereum below; so that the tuber and the gray substance that surrounds the aperture may be regarded as a continuous mass. In this subject, the infundibulum was not adherent to the anterior commissure, but to the tuber cinereum: hence the pituitary gland could exert no influence over this medullary cord, except through the agency of the tuber cinereum; to which body I consider the pituitary gland to be an auxiliary appendage.

TREATMENT OF SYNCOPE AFTER DELIVERY.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—I take occasion to communicate a discovery, which I have made, for your valuable Journal, if it be a discovery, and you deem it worthy a place in your pages. I have mentioned it to quite a number of my medical friends, all of whom say they never saw any mention of it in any work, and never heard of it before, and they all have urged me to communicate it to you for publication to the profession. My discovery is—*compression of the abdominal aorta in cases of faintness after delivery.* Who that has long practised in this branch of our business, has not been often terrified by the sudden and unexpected occurrence of a severe fit of syncope to a patient within an hour or two after delivery, even when every human precaution has been taken? Who has not seen the lamp of life, in these circumstances, so flicker that it appeared every moment ready to go out, even while every known remedy was being employed to keep it burning? Compression of the aorta at the umbilicus (it is easily done) will immediately rally the patient. Compression may be continued till stimulants will have time to operate, and restore the necessary nervous influence, and be gradually abated as this influence is restored. It is already known that compression of the abdominal aorta is the most effectual remedy for hemorrhage after delivery. Syncope is sometimes the consequence of hemorrhage. This compression is the surest, safest and readiest remedy known for either of these difficulties, or both together. Syncope sometimes ensues when no hemorrhage or other untoward condition is present. Compression of the aorta at the umbilicus will stop the faintness, and do no evil to other conditions. Let all try it who would prevent the occurrence of those sudden deaths that we sometimes hear of as happening without any known cause. None need have any apprehensions, in trying it, of trespassing upon my private rights, for I have no idea of securing letters patent, as has been done in some other cases!

SAMUEL C. WAIT, M.D.

Gouverneur, N. Y., May 5, 1851.

LARGE NUMBER OF WORMS DISCHARGED FROM A CHILD.

BY D. T. MARTIN, M.D., PULASKI COUNTY, VA.

FEBRUARY 20, 1851, I was called at 7 o'clock, A. M., to visit a child, 5 years old, the daughter of J. W. H., in the town of Newbern, Pulaski County, Virginia. According to the account given by her parents, she had been a little unwell for two or three days; but on the day previous to my visit, she was suddenly taken with pain in the abdomen and vomiting. As her habit was known to be costive, her parents gave an enema of castor oil and warm water, as well as oil by the mouth. They also applied fomentations to the abdomen, and gave a large quantity of laudanum (according to their statement about 3 ij. in twenty hours), without relief. At the time she was examined by me, I found her laboring under the symptoms of colic, pain in the region of the stomach and bowels, the muscles of the abdomen drawn up into ridges or knots, with some tenderness upon pressure about the umbilicus, constant inclination to lean forward and lie upon the face, tossing to and fro, retching and vomiting every few minutes, throwing up a frothy mucus, mixed with a little bile; the tongue coated with a yellowish fur; there was also some fever, the pulse being full and frequent, though compressible.

I gave her calomel, grs. iv.; Dover's powder, grs. ij.; to be followed in four hours by castor oil, and applied sinapisms and fomentations to the abdomen. The oil was taken, but afterwards thrown up from the stomach.

I again visited her at 2 o'clock, P. M., and gave calomel, grs. ij.; Dover's powder, gr. j.; after which she slept about four hours, at which time she was aroused for the purpose of giving an enema composed of warm water, castor oil, and spirits of turpentine. She now complained of a choking, whereupon about ten drops of spirits of turpentine were given by the mouth. Some time elapsed, and she had a small passage, in which were five or six lumbricoides; after the lapse of an hour she had a second passage, in which were four or five worms of the same kind. She then slept about two hours, when she awoke and had the third passage, which brought one hundred and fourteen worms (lumbricoides), making in all one hundred and twenty. I understood from her father to-day (February 25th) that she had had another passage on the evening of the 21st inst., in which were sixteen worms of the same kind, making in all one hundred and forty.

The novelty of this case does not consist so much in the symptoms or treatment, as in the number of worms discharged.—*The Stethoscope.*

 THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, MAY 14, 1851.

EDITORIAL CORRESPONDENCE.

Rhodes, March 20th, 1851.—I have been contemplating the skeleton, as it were, of this once magnificent city, and the impoverished and forsaken

looking island that formerly possessed one of the seven wonders of the world, the Colossus, which was both a statue and a lighthouse, 150 feet high. History abounds with curious and extraordinary accounts of the ancient power, grandeur, wealth and refinement of Rhodes. It is 36 miles long, by 15 broad, abounding in wood, with a soil that would produce abundantly, were the least effort made on the surface; but such is the policy of the Turkish government, that poverty broods over the forest of pillared ruins which are spread out in every direction, and desolation is indicated as far as the eye can extend, from its principal port into the interior. Rhodes was densely peopled before the Trojan war, and while Homer was living contained three great cities. The city of Rhodes, at the period of its meridian glory, is represented to have been nine miles in circumference, and appears to have been a little west of the present town, on the margin of the island. At the present moment, there are but about 30,000 inhabitants on the whole territory—three fourths of whom reside within the city walls and immediate neighborhood. A high, strong wall, with several stately edifices, were the creation of the Knights of Malta, who were driven from their strong hold by the Turks, in 1522, under Suleiman the Magnificent. There is neither trade, manufactures, nor agriculture—and how the inhabitants subsist, is quite a mystery. There are 40 villages throughout the whole island, but the people neither plant nor reap, and their degradation surpasses belief. Such is the imagined holiness and purity of the Mussulmen, that neither Jew, Greek, Christian, nor any one not professing Mahomedan tenets, are permitted to remain within the town at the hour of closing the evening gates. For some years past, the Greek shipwrights have infused considerable activity into the place, by having, not unfrequently, 18 vessels on the stocks at a time; and while the benefits arising from the employment of hundreds was felt to be of importance to the whole community, the government gained a regular income. With a view to grasping more, the blighting policy of this abominable system of government, it sent forth an order, a short while since, that no vessel should hereafter be launched unless the owners obligated themselves to sail it under the Turkish flag. This was a condition that no one would comply with, and the business of Rhodes, therefore, has dwindled down to nothing, and the government now is without a particle of revenue from the island. A new plan is in agitation, to make it a general quarantine station. There is not a road on the island, and even fire wood cannot be brought to the town; not a cow or sheep is pastured, and on my arrival the British consul said that there had been no meat to be had for four days, on account of a high wind that interrupted all intercourse with the opposite shore, at the foot of the Caramanian mountains. The earthquake of Feb. 25th, more disastrous than had occurred for many years, made terrible work with the city. St. John's Tower, a vast stone structure within the wall, facing the harbor, was rent from top to bottom. After standing more than four centuries, a surprising monument of the skill, thoroughness and mechanical ingenuity of the knights, it will now have to be taken down, or it will fall into the basin of the large harbor, and utterly destroy what remains of an anchorage at that point. The grandmaster's palace is equally shattered, and the eastern gate is crushed at the top of the arch. This frightful catastrophe has given a finishing air to Rhodes. Sixty miles to the east, a mountain opened, into a rent of which a village with its 200 inhabitants fell, and the mighty precipices came together again.

I had but an imperfect view of Patmos, where the book of Revelation

was written; but Samos, Cos, and many other islands, renowned in the revolutions to which this entire region of country has been incident from immemorial time, were examined with unusual emotions.

Smyrna.—For five days, I have been incarcerated in a vile hole, called the quarantine ground, with Arabs, Turks, Armenians, Jews, Christians, infidels, and rascals of all kinds. The costumes are as various as the characters and dispositions of the wearers. Some are in Albanian petticoats. Think of a hale six-footer, in a red cap, mustaches two inches long, white stockings, and a petticoat of white cotton reaching to his knees, containing ten yards of material! Each one has to pay room rent, and the hire of a dirty fellow to watch him while he remains. I pay a man in the city two dollars a day for two meals and a kind of bed for the night. There is neither hospital, inspection of any kind, or even conveniences for having a handkerchief washed. On arriving in port, away goes everything into the quarantine. If the individual has food of his own, he is at liberty to consume it; if money, he may order food from a hotel; or, having neither, he may starve to death, and be buried, without exciting either sympathy or inquiry. On the day before pratique is given, a doctor pops his head into the apartments, without knowing or caring a whit about a soul in the establishment, and, if the fees are paid, pronounces each one who pays the money down free from the plague. All the quarantine detentions in Syria, Egypt, Turkey and Greece, are contrivances of Italians, who make use of them for their own personal benefit. A simultaneous effort by the European governments, representing the facts as they are, would instantly sweep away the whole of these shameful obstructions to maritime intercourse; but unfortunately, the English, both at Malta and Corfu, are playing precisely the same iniquitous game, with precisely the same object—revenue; consequently not a word is said, and the Italian leeches are sucking the pockets dry of all who unfortunately fall within their official clutches.

Here, in Smyrna, was one of the seven churches—not a stone of which can be recognized, though the site is fully established. Within the fortress, lying at the top of a hill, back of the town, now in ruins, Polycarp, a successor of the apostles, was martyred. Sardis, Philadelphia, Ephesus, &c., where other churches referred to in the New Testament were located, are within a circle of two days' ride, on horseback. The monument of Sesostris, an Egyptian king, who subdued this country, and having died on a conquering expedition, was buried in an obscure spot, about 28 miles distant, was not long ago discovered—and proves Herodotus to have been an accurate, reliable historian. It is in relief, the size of life, on the face of a rock, and was executed thirteen hundred years before the commencement of the Christian era. In no Turkish city have the bazars presented a neater appearance, a greater variety, or an indication of equal thrift. Italians seem to be in every thing and every where in Smyrna. The burying grounds, crowded with tall, dark, gloomy cyprus trees, together with thousands of rickety, half fallen, and broken tombstones, made top-heavy with imitations of turbans, in a huge lump of marble, are dreary abodes even for the dead. Notwithstanding the overwrought encomiums bestowed upon them by enthusiastic travellers, they have not a single redeeming feature to a person who has seen the Campo Santo, at Naples, or Mount Auburn, near Boston. From the castle is obtained an admirable view of Smyrna bay, the city below, with its caravanseras, minarets, gardens, and charming environs, for a considerable distance into the country.

In short, after peeping at and into various things that were novelties, and some that were not, we came to the conclusion that Smyrna is rapidly approaching civilization. Even now, about as many hats are worn as red caps! The Jews have eleven synagogues—but a hundred are needed, if such would better their morals. Greeks are too often cheats, every one admits; and the Turks, though much more honest than any from the world of barbarians who have taken up their residence either here or in other parts of the empire, are not unmindful of their own interest. Five days ago, a great Persian caravan arrived, laden with rugs, carpets, shawls, silks, and beautiful stuffs, which appears to have caused considerable excitement. Three times a year comes an army of camels, which gives an impetus to trade. I went down to the encampment of one lately arrived, to see the show. The animals were far superior to any in Syria or Egypt. Their saddles, too, were excellent, and well fitted to the humps, which is not often the case with those in common use on the desert, where it would seem they ought to be the best. One improvement in the face-covering of the Turkish females was noticed, that does not interfere so constantly with respiration, as the thick veils, corners of a sheet, and such like coverings, that the same class usually wear in other towns and cities further south. A black piece of gauze appears to be stiffened with starch, and stretched over a semicircular piece of wire, which by its weight stretches the veil down as far as the tip of the nose, and thus they wander through the narrow streets, half the face, a little way off, appearing black. They shuffle along in yellow boots, stuck loosely into a pair of slippers—followed by their perpetual janus, a coal black eunuch; or if two or three ladies are together, a female slave or two answers all the purpose of servants and watchers.

Smyrna is now in the enjoyment of a full measure of public health. The diseases present nothing remarkable in their character. The city is an old one, and intimately associated with extraordinary historical events, notwithstanding the common idea that it is simply a place for shipping figs. A population of 15,000, together with the strangers always here, make considerable bustle, in spite of the smoking apathy of the Turks. Every shop-keeper sits flat on his floor—all his food and chattels being within arm's length. Wholesale dealers squat in a spot scarcely larger than a pew of a modern church, in their stocking feet, forever smoking. Whenever a customer wishes to examine a particular specimen of their fabrics or wares, another smoking drone puts on his slippers deliberately, walks off to the magazine, and in his own snail-like manner returns with what is called for. No anxiety for a trade is manifested in a Turk's countenance. One of the extraordinary things that astonishes a stranger here, is the immense burdens laboring men carry on their backs. They have a kind of saddle, suspended from the shoulders, on which the packages are laid, and stooping forward they march off with the orderly pace of a camel. I met one with a barrel of new rum on his back, lettered *Boston manufacture*.

Bulwer and Forbes on the Water Treatment.—A little volume has just appeared from the press of Messrs. Fowlers & Co., New York, called "Bulwer and Forbes on the Water Treatment; a compilation of papers on the subject of Hygiene and Rational Hydropathy; edited by R. S. Houghton, M.D." We have perused this book with much care, in consideration of its being mostly written by gentlemen distinguished for their literary and scientific attainments. As regards Sir Edward Lytton Bul-

wer, we have not quite so much confidence in him as we have in the other writers, from the fact that his object is apparently the recommendation of a certain water-cure establishment at Malvern, kept by one Dr. James Wilson, a disciple of the *immortal* Priessnitz. Dr. John Forbes's chapter, "a Review of Hydropathy," is certainly written with much candor, and in a spirit which entitles it to our respect. It should be carefully read by every medical man. The "two chapters on bathing and the water treatment," by Dr. Erasmus Wilson, are scientifically and ingeniously prepared, and will, perhaps, change the minds of some in favor of the system of bathing in disease as well as in health. The paper by Sir Charles Scudamore, M.D., "a Medical Investigation of the Water-cure Treatment," is written with that spirit which is ever best calculated to disarm prejudice, and to secure respect for the opinions advanced. Sir Charles's sentiments respecting ignorant men undertaking to *practise* hydropathy, perfectly agree with our own. We give the following extract. He says—"I much fear that, from the facility and apparent simplicity of the practice, and the temptation to pecuniary gain, persons without the qualification of medical education will be induced, not only to form water establishments, but to conduct them altogether, and boldly undertake the responsibility of the public health. In no illiberal spirit, but from honest feelings, I protest against this monstrous pretension and error. DIAGNOSIS IS MOST ESSENTIAL. *Who that is untaught and inexperienced, can understand the different kinds, and the many phases of disease!* And without such discrimination, and also judicious estimate of the powers of the individual to bear treatment, how can its amount be properly prescribed?" The chapter on "The Cold-water Cure; its Use and Misuse," by Herbert Mayo, M.D., is written in a style that might be expected from one of such high attainments. Dr. Mayo was suffering from a severe attack of rheumatism or gout, and in despair of ever getting cured from the usual remedies, took to the cold waters of Marienberg, on the banks of the Rhine, and there placed himself under the care of a Dr. Schmitz. Although he was not *cured* of his maladies, he nevertheless experienced much improvement by the *proper treatment* with cold water. The last chapter in this book is written by the editor, Dr. Houghton, who gives *his* observations on water cure, and sums up the evidence of the distinguished writers already mentioned. While we have the most perfect respect for the opinions of such learned men, we must beg to differ from them relative to the universal use of water as a therapeutical agent. We have always contended that water, in its *proper application*, might be used in disease, and our hostility has never been against a reasonable use of it in health or sickness, but rather directed towards the uneducated and unprincipled practitioners who have adopted hydropathy as they would a new fashion, or for gain.—We are indebted to Fetridge & Co., 74 Washington st., for a copy of the above-named work.

Pharmacopæia of the United States.—"The Pharmacopæia of the United States of America. By authority of the National Convention held at Washington, A. D. 1850. Philadelphia: Lippincott, Grambo & Co. 1851." This standard work comes to us in an improved style, and containing much additional matter. We presume it unnecessary to enter into details, as to the important alterations that have been made in it since 1840, or the value that should be placed upon such a book by the

profession and dispensing apothecaries. A mere announcement that it is completed by the Committee appointed for the purpose, and is for sale by the publishers, must be sufficient to cause it to be sought for. The Committee certainly deserve our thanks for the able manner in which they have discharged their duties. The work is not only creditable to them, but is an honor to the medical profession and to the country whose name it bears.

Dunglison on New Remedies.—Messrs. Blanchard & Lea, publishers, of Philadelphia, have just issued from press another edition of the able work by Dr. Dunglison on "New Remedies." This makes the sixth edition that has been published. It contains extensive additions, among which may be mentioned, an index of diseases, with the particular page to which the various remedies prescribed in those diseases are referred to. We look upon this work as one well stored with therapeutical information, and which we can always consult as good authority. Every useful remedy in treating disease is mentioned, the authority given, with the mode of preparation and administration, so that those who possess this edition will have a knowledge of all the old and standard remedies, together with the new ones up to the present time. For sale by Ticknor & Co.

Attempt to produce Abortion with Oil of Tansy, followed by Death.—Coroner Pratt was called last Wednesday, to hold an inquest on the body of Elizabeth Sherman, 21 years of age, who had been employed for some time past as seamstress in a family in Kingston street, Boston, and who died, after an illness of three or four hours. The jury returned a verdict that she came to her death in consequence of taking two ounces of oil of tansy for the purpose of procuring abortion.

The apothecary did wrong to sell that quantity, and especially to a child of 10 or 12 years of age, without a prescription from a physician.

Sale of Poisons by Apothecaries.—It is quite time for our Legislature to pass a law restraining apothecaries from selling poisonous substances without a physician's order. The necessity of such restriction has been repeatedly advocated in our pages, but we believe there never has been any definite action taken on the subject by our Legislature. If any thing would seem to demand immediate action by our law-makers, it is to prevent the frequent occurrence of such lamentable casualties as the one mentioned above.

An Editor in Affliction.—The editor of the "American Medical and Surgical Journal," Syracuse, N. Y. (which is a publication ostensibly devoted to the reformation of medical practice), says, in his last number, that many interesting communications are necessarily omitted in that number, in consequence of "eleven members" of his family, including his "better half," being sick with the "measels." Our cotemporary has our sympathy for his severe affliction, alike on account of the number afflicted, and the malady from which they are said to be suffering.

Boston Medical Association.—At a meeting of this Association on Monday, May 5th, the following officers were elected for the year ensuing:—

Secretary. E. W. Blake, M.D.; Standing Committee, John Ware, M.D., George Hayward, M.D., J. Mason Warren, M.D., D. Humphreys Storer, M.D., Nathaniel B. Shurtleff, M.D.

A committee was appointed to revise the police and fee table, consisting of Drs. J. M. Warren, J. W. Warren, and N. B. Shurtleff.

Patent Medicines.—It appears that the profession in this State are waking up to a sense of the propriety of doing something to protect the community from the outrageous imposition which is practised upon them by "patent medicine makers and venders." We learn that the subject has been discussed, and committees appointed, in several of the District Societies, to inquire into the matter, and report at an early day what measures it is best to adopt to lessen the evil complained of. We exceedingly regret that our respectable druggists and apothecaries should be identified with the traffic in such nostrums, for we feel assured that if this were given up, they could enjoy as lucrative an income, in a very short time, from their legitimate business. It has been hinted, by several of our most distinguished physicians, that they are fully determined not to patronize those establishments in which patent or secret medicines are manufactured or vended. There are one or two druggists in this city who have for some time discarded such nostrums from their shops; and although for a time they suffered pecuniarily by the experiment, it affords us much pleasure to learn that their loss has been more than made up by the increase of better patronage.

The Meeting at Worcester.—We wish once more to request those of our readers who intend to be present at the annual meeting at Worcester, a fortnight from to-day, and to avail themselves of a reduced fare over the Boston and Worcester Railroad, to send in their names at once to this office, that the arrangement with the Railroad Corporation may be completed.

Norfolk District Medical Society.—A meeting of the Norfolk District Medical Society will be held this day at Dedham, at 11 o'clock A. M. An address is to be delivered by Dr. Edward Jarvis, of Dorchester, on the causes of insanity.

Medical Miscellany.—Dr. Elisha Bartlett has resigned the Professorship of the Institutes and Practice of Medicine in the New York University, which he has filled during the past year.—Dr. Thomas Reyburn has resigned the Professorship of Materia Medica and Therapeutics in the Medical department of the St. Louis University.

MARRIED.—At New Lebanon, N. Y., Dr. H. W. Drown to Miss Mary Sackett.

DIED.—At Pensacola, on the 20th ult., Alexander J. Rice, assistant surgeon U. S. Navy, formerly of Portsmouth, N. H.

Deaths in Boston—for the week ending Saturday noon, May 10, 62.—Males, 37—females, 45—Abcess, 1—accidental, 3—apoplexy, 1—inflammation of bowels, 1—congestion of brain, 1—inflammation of brain, 1—bronchitis, 1—burn, 1—canker, 1—consumption, 17—convulsions, 4—croup, 2—debility, 1—delirium tremens, 1—dropsy, 1—dropsy of the brain, 1—erysipelas, 2—typhus fever, 5—lung fever, 2—scarlet fever, 2—hooping cough, 2—disease of heart, 2—infantile, 5—laryngitis, 1—inflammation of lungs, 2—marasmus, 2—measles, 6—neuralgia, 1—old age, 3—palsy, 1—poison, 1—disease of spine, 1—smallpox, 1—suffocation, 1—teething, 3—unknown, 1. Under 5 years, 33—between 5 and 20 years, 8—between 20 and 40 years, 15—between 40 and 60 years, 17—over 60 years, 9. Americans, 33; foreigners and children of foreigners, 49.

The above includes 13 deaths at the City Institutions.

Depositions of Urate of Soda in Gout.—At the last meeting of the New York Pathological Society, April 23, Dr. Metcalfe exhibited the larynx of a patient who had died with gout, upon which was deposited, in different portions, the urate of soda to considerable extent. The case was narrated in full, and was exceedingly interesting. The patient had inherited the gouty diathesis, and had suffered for years—nearly his whole life. At first the attacks were periodical at intervals of a year, but latterly they had occurred every few weeks. When colchicum first came into use, the patient was in England, and used this remedy by the advice of Sir Henry Hallford, with benefit, and it was about the only remedy which afforded him relief. An interesting point as to this agent was, that while a preparation of the root afforded relief, that of the seeds acted as an acrid poison. The urate of soda was extensively deposited in various parts of the body. A short time before he died, he was attacked with senile gangrene of one foot, accompanied by pain, and excessive heat in the heel, which Dr. Mott remarked, was a pathognomonic sign of spontaneous mortification. Some discussion arose as to whether this senile gangrene was generally dependent upon ossification of the arteries, and it was agreed by most of the surgeons present that it was not.

Another interesting point in the above case was, that when Dr. Metcalfe was called to attend the patient, he was under the homœopathic treatment, and was taking the wine of colchicum in twenty drop doses, with McMunn's elixir of opium. Dr. M. found no occasion to change the treatment.—*New York Register of Medicine and Pharmacy.*

Living in Cellars, in Cities.—Coroner Smith was called Saturday morning to hold an inquest on the body of Cornelius Sullivan, an Irishman 50 years of age, who arrived in this country a short time since, and who died very suddenly Friday night in one of the miserable habitations in Broad street, Boston. The following is the verdict of the Jury:—"That he came to his death at about 11 1-2 o'clock, P.M., on the 2d inst., in a fit, at the cellar room occupied by John Ellard, 109 Broad street. And the jury further say, that the said cellar room is about eighteen feet square, five and a half feet high, having no ventilation, and was occupied Friday night by thirteen persons, and on other nights by fourteen, for three months past, and in their opinion the said cellar is totally unfit for occupation as a sleeping room."

Cod Liver Oil.—A fact concerning the external employment, empirically, of cod liver oil, just now occurs to our memory, which it may be of interest to our readers to state. Many years since, indeed before the editor of this journal had taken it into his head to exist (some of the clear-as-mud school of philosophers asserting that our conception and birth are the result of our volition), there was a negro, in the employ of Mr. Howell, a well-known currier of this city, who attained quite a reputation as a curer of rheumatism. His medicament was the ordinary brown cod liver oil of the currier, applied externally, and rubbed downwards—the old fellow insisting on the downward stroke most pertinaciously. Flannel was directed to be worn over the part affected, and relief in all cases, with a cure in most, was the result. In ordinary attacks of acute rheumatism we have used the same remedy in two cases with marked advantage; and recall the fact here, "for the benefit of those whom it may concern."—*Phila. Lancet.*